

NOTICE OF FEE DUE

DATE:	10-2	5-0)		
TO:	Cof)-C		
FROM:	Office of Initial Pater	nt Examination		
SUBJECT:	Fee Duc			
APPLICATION N	umber <u>109</u>	1598 56	5	
deposit account if a	ttached document subnease check the applicant authorizations is present, notify the applications.	to the appropr	ent and Trademark Offic riate authorizations to d e the Appropriate Fee ncy	e for the charge a . If and
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Declined credit card Non-authorization for	charge to deposit account			
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